STATE OF SOUTH DAKOTA

Statement of Legal Newspaper Ownership and Circulation

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077 2. DATE 1. TITLE OF NEWSPAPER Corsica Oct. 1 2014 3B. ANNUAL SUBSCRIPTION 35.00 3A. NO. OF ISSUES PUBLISHED ANNUALLY 3. FREQUENCY OF ISSUE PRICE \$ 28.30+1.70 + 9X 4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers) Po. Box 45, Corsica, Douglas County, 5D. 57328-0045 5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE Publishing Corsica SD. PUBLISHER (Not printers) Douglas County 6. FULL NAME OF PUBLISHER: Neugebauer mary 7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given. **FULL NAME** COMPLETE MAILING ADDRESS Back KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form. None **AVERAGE NO. COPIES ACTUAL NO. COPIES EACH** 9. EXTENT AND NATURE OF CIRCULATION **ISSUED ISSUED PRECEDING 12** NEAREST TO FILING DATE MONTHS 235 A.TOTAL NO. COPIES (Net Press Run) B.PAID AND/OR REQUESTED CIRCULATION 1. Sales through dealers and carriers, street vendors, 70 counter sales, and paid electronic copies. 2. Mail Subscription 759 730 (Paid and or requested) C.TOTAL PAID AND/OR REQUESTED CIRCULATION 829 800 (Sum of 9B1 and 9B2) D.FREE DISTRIBUTION 1. BY MAIL, CARRIER OR OTHER MEANS 2. SAMPLES, COMPLIMENTARY AND OTHER FREE 0 0 COPIES 8.56 E. TOTAL DISTRIBUTION (Sum of C, D1 and D2) F. COPIES NOT DISTRIBUTED 379 1. Office use, left over, unaccounted, spoiled after printing 0 2. Return from News Agents G. TOTAL (Sum of E, F1 and F2 - Should equal net press run 925 1235 shown in A) Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public I swear that the statements made by me are true, correct, and complete: Sworn to before me this 30 day of 5cpt., 2014 State of South Dakota County of _ My commission expires: 8-5-20(Seal)

Form: SOS REC 051 8/2014

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